

primary studies - published, non RCT

Evaluation of the forced expiration technique as an adjunct to postural drainage in treatment of cystic fibrosis.

Code: PM486968

Year: 1979 **Date:** 1983

Author: Pryor JA

Participants

8 children with cystic fibrosis

Interventions

chest physical therapy administered by a parent

Outcome measures

Spirometric and plethysmographic evaluations were performed pre-CPT and at 5 and 30 minutes post-CPT. The pre-CPT measurements after a three-week period with no CPT were compared with the values while receiving CPT on a regular twice daily basis.

Main results

There was a significant decrease after three weeks without CPT for FVC (P less than 0.025), FEV1 (P less than 0.005), FEF25-75 (P less than 0.005), and Vmax60TLC (P less than 0.025). When the patients had been receiving CPT on a regular basis, the only immediate effect was an increase in PEFr after 30 minutes post-CPT (P less than 0.05). After three weeks without CPT, there were increases at 30 minutes post-CPT for FVC (P less than 0.005) and Vmax60TLC (P less than 0.05).

Authors' conclusions

These findings indicate that although there may be little immediate functional improvement when CPT is received on a regular basis, a three-week period without CPT leads to a worsening of the functional status, which is reversed with renewal of regular CPT.

<http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/123/CN-00208123/frame.html>

See also

British Medical Journal YR: 1979 VL: 2 DE: RCT

Keywords

Adolescent; Airway clearance technique; Child; non pharmacological intervention - psycho-soc-edu-org; non pharmacological intervention - devices OR physiotherapy; Percussion; pharmacological_intervention; Vibration; Chest physiotherapy; Respiratory System Agents; oscillating devices;